

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

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| PLAINTIFF JEFFREY ALONZO SIMMS | COURT CASE NUMBER 04-1205-SLR |
| DEFENDANT JANE M BRADY | TYPE OF PROCESS CIVIL |
| SERVE ➔ | NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN DEPARTMENT OF JUSTICE JANE M BRADY A.G. |
| AT | ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 820 N. FRENCH STREET WILMINGTON DELAWARE 19801 |
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: | |
| MR. JEFFREY ALONZO SIMMS S.B. #198625 DELAWARE CORRECTIONAL CENTER 1181 PADDOCK ROAD SMYRNA, DELAWARE 19977 | Number of process to be served with this Form - 285 4 Number of parties to be served in this case 4 Check for service on U.S.A. <input checked="" type="checkbox"/> |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

302-577-8500

| | | | |
|---|---|---|-------------------------------|
| Signature of Attorney or other Originator requesting service on behalf of: Jeffrey Alonzo Simms | <input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT | TELEPHONE NUMBER 410-754-7766 | DATE AUGUST 18 2005 |
|---|---|---|-------------------------------|

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|---------------|---------------------------------|--------------------------------|--|------------------------|
| I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) | Total Process | District of Origin No. _____ | District to Serve No. _____ | Signature of Authorized USM, Deputy or Clerk h | Date 8/29-05 |
|---|---------------|---------------------------------|--------------------------------|--|------------------------|

I hereby certify and return that ☒ I have personally served, ☐ I have legal evidence of service, ☐ I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

| | | | | | | |
|--|--|---|-------------------------------|------------------|--------------------------------|------------------|
| Name and title of individual served (if not shown above) Keith Brady | FILED SEP - 2 2005 U.S. DISTRICT COURT DISTRICT OF DELAWARE | <input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. | | | | |
| Address (complete only if different than shown above) | | Date of Service 8/31/05 | Time 1030 am | | | |
| | | Signature of U.S. Marshal or Deputy h | | | | |
| Service Fee | Total Mileage Charges (including endeavors) | Forwarding Fee | Total Charges | Advance Deposits | Amount owed to U.S. Marshal or | Amount of Refund |

REMARKS: